Case 4:08-cv-01908 Document 20-1 Filed in TXSD on 07/27/09 Page 1 of 1 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent Print your name and address on the reverse ☐ Addressee scithat we can return the card to you. C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: □ No ANTHONY P GRIFFIN A GRIFFIN LAWYERS **1115 MOODY** 3. Service Type **GALVESTON TX 77550** Certified Mail ☐ Express Mail Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7007 0710 0004 1936 1763 (Transfer from service label)

Domestic Return Receipt

PS Form 3811, August 2001

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1. Article Addressed to:		D': Is deliv	very addres: i, enter deliv	s different fro ery address	om item 1? s below:	☐ Yes ☐ No
ANTHONY P GRIFFIN A GRIFFIN LAWYERS 1115 MOODY						6 2009
GALVESTON TX 77550		Reg	e Type tified Mail pistered ured Mail	☐ Expres ☐ Return ☐ C.O.D.	Receipt fo	or Merchandise
	4. Restricted Delivery? (Extra Fee) ☐ Yes				☐ Yes	
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